

JAN 16 2007

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To: Examiner: John P. Leubecker From: Thomas Spinelli

Group Art Unit 3739

Fax: 571-273-8300

Pages: 16 (including cover sheet)

Phone:

Date: January 16, 2007

Rec: USSN: 10/726,937
Filed: December 3, 2003
Inventor: Tomoya Takahashi
Our Docket: 17296

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

• Comments:

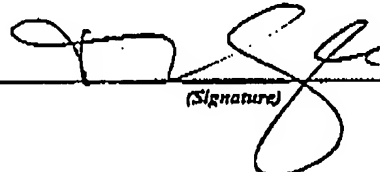
Attached for entry into the above application:

- 1) Request for Continued Examination Transmittal (in duplicate)
- 2) Amendment Transmittal (in duplicate)
- 3) Amendment and Response Under 37 C.F.R. 1.114
- 4) Authorization to charge Deposit Account \$790.00
- 5) Certificate of Transmission by Facsimile dated January 16, 2007

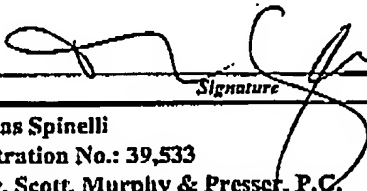
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JAN 16 2007

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 17296
Applicant(s): Tomoya Takahashi			
Application No. 10/726,937	Filing Date 12-03-2003	Examiner John P. Leubecker	Group Art Unit 3739
Invention: ADJUSTING METHOD FOR ENDOSCOPE SYSTEMS			
<p>I hereby certify that this <u>Amendment Transmittal Letter</u> <i>(Identify type of correspondence)</i></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u>)</p> <p>on <u>January 16, 2007</u> <i>(Date)</i></p> <div style="text-align: right; margin-top: 100px;"> <u>Thomas Spinelli</u> <i>(Typed or Printed Name of Person Signing Certificate)</i>  <i>(Signature)</i> </div>			
<p>Note: Each paper must have its own certificate of mailing.</p>			

JAN 16 2007

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 17296									
Applicant(s): Tomoya Takahashi													
Application No. 10/726,937	Filing Date 12-03-2003	Examiner John P. Leubecker	Customer No. 23389	Group Art Unit 3739	Confirmation No. 5378								
Invention: ADJUSTING METHOD FOR ENDOSCOPE SYSTEMS													
COMMISSIONER FOR PATENTS:													
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.													
CLAIMS AS AMENDED													
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE								
TOTAL CLAIMS	14 -	22 -	0	x \$50.00	\$0.00								
INDEP. CLAIMS	2 -	4 -	0	x \$200.00	\$0.00								
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00								
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00								
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ In the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.													
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.													
 _____ Signature			Dated: January 16, 2007										
Thomas Spinelli Registration No.: 39,533 Scully, Scott, Murphy & Presser, P.C.			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</td> </tr> <tr> <td colspan="2" style="text-align: center;">(Date)</td> </tr> <tr> <td colspan="2" style="text-align: center;">Signature of Person Mailing Correspondence</td> </tr> <tr> <td colspan="2" style="text-align: center;">Type or Printed Name of Person Mailing Correspondence</td> </tr> </table>			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____		(Date)		Signature of Person Mailing Correspondence		Type or Printed Name of Person Mailing Correspondence	
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(Date)													
Signature of Person Mailing Correspondence													
Type or Printed Name of Person Mailing Correspondence													
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P11LARGO/REV10

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17296				
Applicant(s): Tomoya Takahashi									
Application No. 10/726,937	Filing Date 12-03-2003	Examiner John P. Leubecker	Customer No. 23389	Group Art Unit 3739	Confirmation No. 5378				
Invention: ADJUSTING METHOD FOR ENDOSCOPE SYSTEMS									
COMMISSIONER FOR PATENTS:									
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.									
CLAIMS AS AMENDED									
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE				
TOTAL CLAIMS	14 -	22 -	0	x \$50.00	\$0.00				
INDEP. CLAIMS	2 -	4 -	0	x \$200.00	\$0.00				
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00				
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00				
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ In the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
 _____ Signature			Dated: January 16, 2007						
Thomas Spivelli Registration No.: 39,533 Scully, Scott, Murphy & Presser, P.C.			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.9(a)] on _____ (Date) </td> </tr> <tr> <td style="padding: 5px;"> _____ Signature of Person Mailing Correspondence </td> </tr> <tr> <td style="padding: 5px;"> _____ Typed or Printed Name of Person Mailing Correspondence </td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.9(a)] on _____ (Date)	_____ Signature of Person Mailing Correspondence	_____ Typed or Printed Name of Person Mailing Correspondence
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